

ANNOUNCEMENTS

The principal author of hospTrends, Tom Muller, has retired from state service. Tom has worked on this report since its inception in 1997. Thank you, Tom for your dedication, opinions and hard work for the Hospital & Patient Data section.

Visit the Department of Health web site at <http://www.doh.wa.gov/EHSPHL/hospdata> for a large variety of hospital data and reports. Included are patient guides, hospital discharge data and reports, and hospital financial data and reports. Also included are Directory of Hospitals, CHARS Procedure Manual, *Accounting and Reporting Manual for Hospitals*, and Charity Care reports. *hospTRENDS* is available at the link: <http://www.doh.wa.gov/EHSPHL/hospdata/hospTrend/Default.htm>

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Your opinions are important to us. Please let us know what you like or don't like about the content and presentation of the *hospTRENDS* report. Contact information is available on page 4 of this issue.

PREFACE

All licensed hospitals in the State of Washington submit summary financial and utilization data to the Department of Health following each calendar quarter. Reported data are edited, summarized, and analyzed by Hospital and Patient Data Systems staff. Specific data elements are defined in the Department's *Accounting and Reporting Manual for Hospitals*. Utilizing these data, various financial and utilization rates and ratios are calculated to enhance the description of the financial condition of hospitals in the state. The provision of information describing emerging hospital utilization and financial trends to all concerned parties is the primary purpose of this series of reports.

Instead of focusing on individual calendar quarters, the data in this report are aggregated into twelve month periods consisting of four calendar quarters each. This aggregation reduces the impact of seasonal fluctuations, which could distort actual trends occurring within the hospital industry.

Since the period covered by this report ends with the last quarter of the calendar year, the report provides

a preliminary look at 2004 calendar year results. However, it must be emphasized that this first glimpse is subject to change. The quarterly reports submitted by hospitals contain interim data which have not been subjected to audit review. Future adjustments and/or revisions as a result of both the hospital's internal accounting system review and the formal procedures of outside auditors may result in changes to previously submitted data. These future revisions will be reflected in the hospital's year end reports. The year end reports not only reflect audit adjustments, but also provide substantial additional detail, which allows analysis of the information provided in greater depth.

The last quarter of the calendar year provides an opportunity for a shift in the emphasis of the report. Instead of the 12 most recent four quarter periods, this report will focus on the past ten calendar years.

SUMMARY

Since calendar year 1994 total patient service revenue has increased by 221.3%, which is a compound rate of increase of 12.4% per year. Over this time period outpatient revenue grew more rapidly (14.8% per year compounded) than inpatient revenue (10.9% per year compounded). As a result, outpatient revenue expanded from 35.1% of total patient service revenue in calendar year 1994 to 43.3% of total patient service revenue in calendar year 2004.

Contractual adjustments in calendar year 2004 jumped 496% over the calendar year 1994 level. This is an annual compound growth rate of 19.6% per year since calendar year 1994.

Charity care reached a new high of \$408 million. This resulted in a charity care proportion of 2.16%, which was the highest ever recorded since quarterly records have been kept starting in 1987.

Net operating income in calendar year 2004 declined 14.8% over calendar year 2003 to \$293 million. 2003 had the highest level of net operating income ever recorded for any annual period since hospital financial records have been maintained by the Department of Health or the Washington State Hospital Commission. This net operating income resulted in an operating margin of 2.96%. 2004's net income per adjusted discharge of \$314.21 was second only to that of 2003 as the highest ever recorded.

Since calendar year 1994, inpatient discharges have grown by 17.2%, while patient days have inched up 13.9%. This resulted in a 2.9% drop in average length of stay. As a result of the significant growth in the

proportion of outpatient revenue over the period, adjusted discharges expanded by 32.9%.

In calendar year 2004 average days in accounts receivable declined 4.8 days from the previous year to 64.2 days. Average days in accounts receivable were down for all payer groups.

FINANCIAL INDICATORS

Total Patient Service Revenue

During calendar year 2004 total patient service revenue, which is the sum of billed charges for all hospital services, increased by \$2.1 billion to \$18.9 billion, which was an increase of 12.2%. This percent of increase has been getting smaller 8 quarters in a row. The recent high was 16.9% for the four quarters ending December 31, 2002. Over the past ten calendar years, total patient service revenue has grown 221%, which is an average compound rate of increase of 12.4% per year. Since calendar year 1994, inpatient revenue has grown at an annual compound rate of 10.9%, while outpatient revenue has grown at an annual compound rate of 14.8%. However, since calendar year 2003 inpatient revenue has increased more than outpatient revenue. During the past year inpatient revenue grew by 13.2% while outpatient revenue grew by only 11.0%. Compound annual growth rates since 1994 by payer group were 12.1% for Medicare, 11.6% for Medicaid and 12.9% for other payers. During the past year, Medicare and Medicaid revenue outgrew all Other payers by a significant margin. Medicare grew by 15.1%, Medicaid by 14.7% and Other payers only grew 9.6%.

Deductions from Revenue

Hospitals do not realize all of the billed charges represented by total patient service revenue. The difference is deductions from revenue. In calendar year, 2004 deductions from revenue advanced by \$1.39 billion, or 16.9%, to \$9.6 billion. Contractual adjustments, which are the primary component of deductions from revenue, grew by 15.3% to \$9.2 billion. Contractual adjustments have expanded 496% over the calendar year 1994 level, which reflects an annual compound growth rate of 19.6%. During the past year, increases in contractual adjustments were 17.4% for Medicare, 11.4% for Medicaid, and 15.0% for other payers. Since calendar year 1994 contractual adjustments have jumped 450% for Medicare, 282% for Medicaid and 732% for other payers, which are annual compound growth rates of 18.6%, 14.4% and 23.6% respectively. The substantial growth of contractual adjustments for other payers reflected a major growth in negotiated rate contracts with major health insurers, managed care plans, HMO's and other contractual payers. Contractual adjustments for Medicare and Medicaid reflect the difference between billed charges and amounts allowed by these programs. During calendar year 2004 charity care reached a new high of \$408 million, which was the highest level recorded for

any annual period since hospital financial records have been maintained by the Department of Health or the Washington State Hospital Commission. This resulted in a charity care proportion of total patient service revenue of 2.16%, which also is the highest ever recorded.

Net Patient Service Revenue

Increasing by 7.7%, net patient service revenue reached \$9.3 billion in calendar year 2004. Net patient service revenue grew by 12.2% for Medicare, 18.3% for Medicaid and 2.6% for other payers over the year ago level. Growth rates from calendar year 1994 for net patient service revenue were 101% for Medicare, 145% for Medicaid and 125% for other payers, resulting in annualized growth rates range of 7.3%, 9.4% and 8.4% per year, respectively. Net patient service revenue is defined as the amount of revenue actually realized by hospitals.

Operating Expenses

Operating expenses are the costs of providing health care services to hospital patients. During calendar year 2004 operating expenses totaled \$9.0 billion, which was an increase of 8.64% over the previous year. This is the highest increase in operating expenses realized since the twelve-month period ended September 30, 2003. Since aggregate patient volume as measured by adjusted discharges was stagnant over the calendar year 2003 level, the increase in operating expenses not related to patient volume was 8.65%. This substantially exceeded the 3.3% increase in the overall consumer price index and was over the 5.2% increase in the medical services component of the index. Over the past ten years operating expenses have grown by 121%, which is an annual compound growth rate of 8.3%.

Net Operating Income

Although most hospitals in Washington State are operated by not-for-profit corporations or governmental entities such as public hospital districts, net operating income is still necessary to provide the funds needed for replacement of buildings and equipment as well as the acquisition of modern medical technology. During calendar year 2004 Washington hospitals generated \$293 million of net operating income, which was a decline of 14.8% over calendar year 2003. This was the second highest level of net operating income ever recorded for any annual period since hospital financial records have been maintained by the Department of Health or the Washington State Hospital Commission. It is more than 3 times the low of \$97 million reached in calendar year 2000. Net operating income in calendar year 2004 was 79% over calendar year 1994, reflecting an average long term compound growth rate of 6.0% per year. Net income per adjusted discharge was \$314.21.

UTILIZATION INDICATORS

Discharges, Patient Days, and Length of Stay

Inpatient activity is measured primarily by discharges and patient days. In calendar year 2004 a total of 525,718 patients were discharged from Washington hospitals. This was 1.0% more than calendar year 2003 and 17.2% more than the ten year low point seen in calendar year 1994. These patients stayed for a combined total of 2,265,487 days, which was a decrease of 0.2% over calendar year 2003, 15.3% over the ten-year low point in the four-quarter period ended September 30, 1996 and 13.9% over calendar year 1994. Average length of stay was 4.31 days, which was slightly below calendar year 2003. In that year which was 4.36. It is also 1.4% over the ten-year low point in calendar year 1998, and 2.9% below the calendar year 1994 level of 4.44 days.

Adjusted Discharges

Adjusted discharges leveled off after a 10-year steady climb that started at the twelve-month period ended March 31, 1994. In calendar year 2004 adjusted discharges reached 932,233, which was a decrease of 38 adjusted discharges, or 0.0%, over calendar year 2003. The 2004 level is 32.9% greater than calendar year 1994. Adjusted discharges are utilized as an aggregate indicator of hospital activity. To calculate adjusted discharges, inpatient discharges are multiplied by the ratio of total patient service revenue to inpatient revenue (excluding skilled nursing facility revenue). With this adjustment, total patient service revenue per adjusted discharge is equal to inpatient revenue (excluding skilled nursing facility revenue) per inpatient discharge. Adjusted discharges are necessary for computing average rates, since total patient service revenue is the only financial indicator that can be split into inpatient and outpatient components.

OPERATING INDICATORS

Rates per Adjusted Discharge

Rates per adjusted discharge relate hospital financial indicators to the "average" patient. Total patient service revenue per adjusted discharge is the total bill for the average patient stay. Deductions from revenue per adjusted discharge is the portion of this average bill that is not paid by Medicare, Medicaid, or health insurers, or is written off as charity care. Net patient service revenue per adjusted discharge is the amount of revenue the hospital actually receives from the average patient visit. Operating expense per adjusted discharge is the cost of providing services to the average patient. Net operating income per adjusted discharge is the amount of money the hospital is able to earn from the average patient stay. Rates per adjusted discharge for calendar years 1994, 2003, and 2004 and the corresponding percentage changes:

Rates per Adjusted Discharge

	YE 12/31/03	YE 12/31/04	% Change
Total Patient Service Revenue per Adjusted Discharge	\$18,057.78	\$20,263.04	+12.2%
Deductions from Revenue per Adjusted Discharge	\$8,796.77	\$10,287.70	+17.0%
Net Patient Service Revenue per Adjusted Discharge	\$9,261.02	\$9,975.34	+7.7%
Total Operating Expense per Adjusted Discharge	\$8,892.31	\$9,661.13	+8.7%
Net Operating Income per Adjusted Discharge	\$368.70	\$314.21	-14.8%

Rates per Adjusted Discharge

	YE 12/31/94	YE 12/31/04	% Change	Annual % Chg
Tot Pat Serv Rev per Adj Disch	\$8,380.64	\$20,263.04	+141.8%	+9.2%
Deduct from Rev per Adj Disch	\$2,346.93	\$10,287.70	+338.4%	+15.9%
Net Pat Serv Rev per Adj Disch	\$6,033.72	\$9,975.34	+65.3%	+5.2%
Tot Oper Exp per Adj Disch	\$5,800.90	\$9,661.13	+66.6%	+5.2%
Net Oper Income per Adj Disch	\$232.82	\$314.21	+35.0%	+3.0%

FINANCIAL RATIOS

Financial ratios accentuate the relationships between financial indicators. The financial ratios selected for this report are not all encompassing but represent financial indicators that can be readily calculated from data available through the quarterly reporting process, as currently designed, without requesting supplemental data from the reporting hospitals.

Days in Accounts Receivable

Accounts receivable is the largest item in the current assets portion of the balance sheet for most hospitals. Days in accounts receivable is a measure of how "current" this asset is. In this report, days in accounts receivable is calculated on an annual gross basis. On a statewide basis days in accounts receivable averaged 64.2 days for calendar year 2004. This was a decrease of 4.8 days, or 6.9%, from calendar year 2003. The days in accounts receivable decreased by 7.9 days

(-14.7%) for Medicare, 8.4 days (-11.8%) for Medicaid and 0.9 days (-1.17%) for other payers.

Operating Margin

Operating margin compares net operating income to total operating revenue. During calendar year 2004, this operating margin reached 2.96%, which was 21.1% lower than the year earlier period. The Operating margin in calendar year 2004 was above the 1.41% realized in calendar year 2000, but is still substantially below the high of 7.20% reached in the four quarter period ended June 30, 1990. Operating margin is a major source of funding for expansion and replacement as well as the acquisition of new medical technology.

Deductible Proportion

The deductible proportion compares total deductions from revenue to total patient service revenue. For calendar year 2004, the deductible proportion reached 50.8%, which was an increase of 4.2% over the year earlier level. This is the first 12-month period since records have been kept in which more than 50% of the billed revenue has not been realized because of deductions. The deductible proportion has grown by 81% in ten years, which is a compound growth rate of 6.1% per year.

Contractual Proportion

The contractual proportion compares total contractual adjustments with total patient service revenue. Correspondingly, the Medicare contractual, Medicaid contractual and other contractual proportions are computed by comparing each payer group's contractual adjustments to the corresponding total patient service revenue for the same payer group. The total contractual proportion reached 48.6%, which was an increase of 2.8%. This was another new high. In calendar year 1987 the contractual proportion was only

10.9%. The Medicare contractual proportion of 56.3% and the Medicaid contractual proportion of 50.1% are well above the contractual proportion for other payers of 42.7%. Medicare and all Other are new highs. Medicaid went down about 2.9%.

Charity Care

The charity proportion of total patient service revenue is 2.16% for calendar year 2004, which is up 51.5% from the year earlier level and was the highest recorded in any four-quarter period. Much of the recent growth in charity care can be attributed to changes implemented during the 2004 legislative session that lowered spending on parts of the Medicaid program

Inpatient and Outpatient Revenue

The relationship between inpatient and outpatient revenue is reflected in the proportion of total revenue to inpatient revenue and in the outpatient revenue percentage. The outpatient revenue percentage declined slightly to 43.3% and the ratio of total revenue to inpatient revenue was 1.76 in calendar year 2004. This is the first decline since 2000 to 2001. Since calendar year 1994, the outpatient revenue percentage has grown by 23%, which is a compound growth rate of 2.1% per year.

Medicare and Medicaid Revenue

The primary payers of hospital bills are the Medicare and Medicaid programs. The Medicare and Medicaid revenue percentages indicate the proportion of total hospital business that these programs represent. In calendar year 2004, the Medicare percentage was 35.1%, and the Medicaid percentage was 15.4%. With 50.5% of total patient service revenue, the Medicare and Medicaid programs have a major influence on the financial health of hospitals.

hospTRENDS

Washington State

Hospital Financial and Utilization Trend Update - Quarter Ended December 31, 2004

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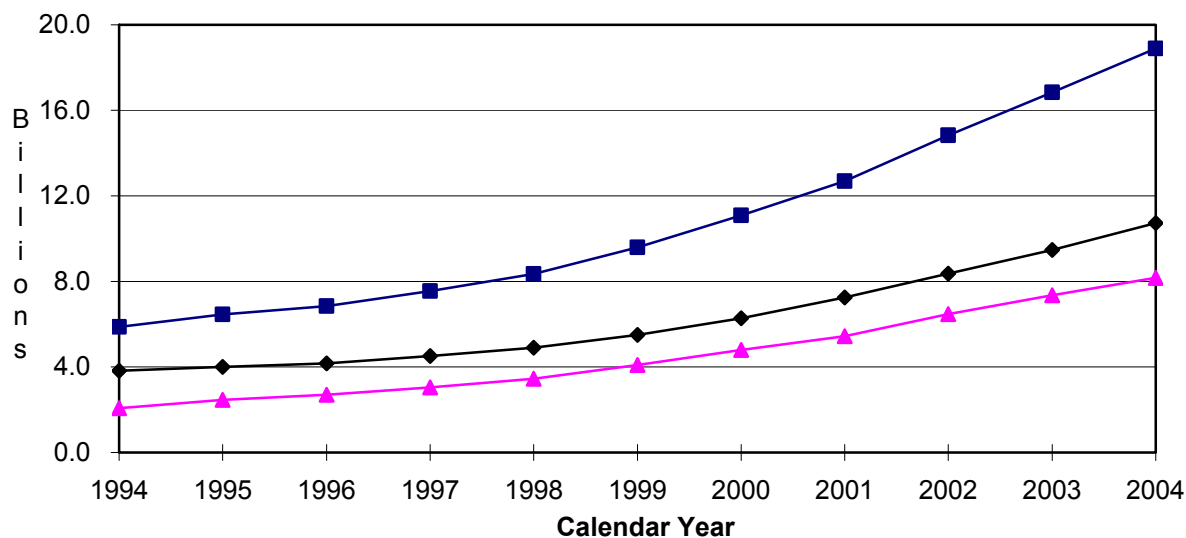
Jude Van Buren, Assistant Secretary - Epidemiology, Health Statistics, and Public Health Laboratories

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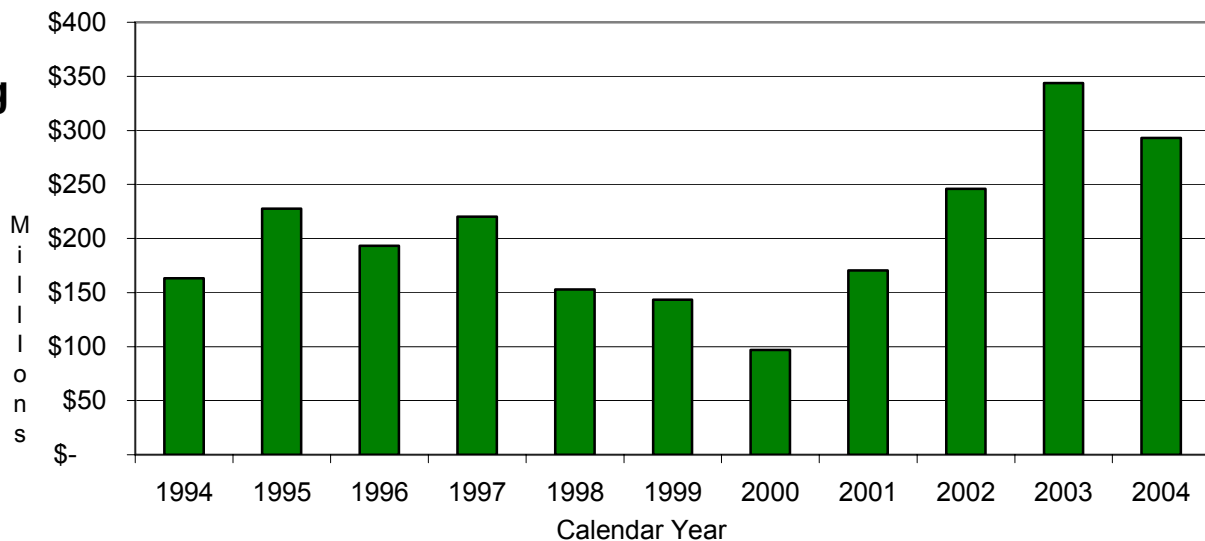
Author: Richard Ordos

Total Patient Service Revenue

■ Total
◆ Inpatient
▲ Outpatient

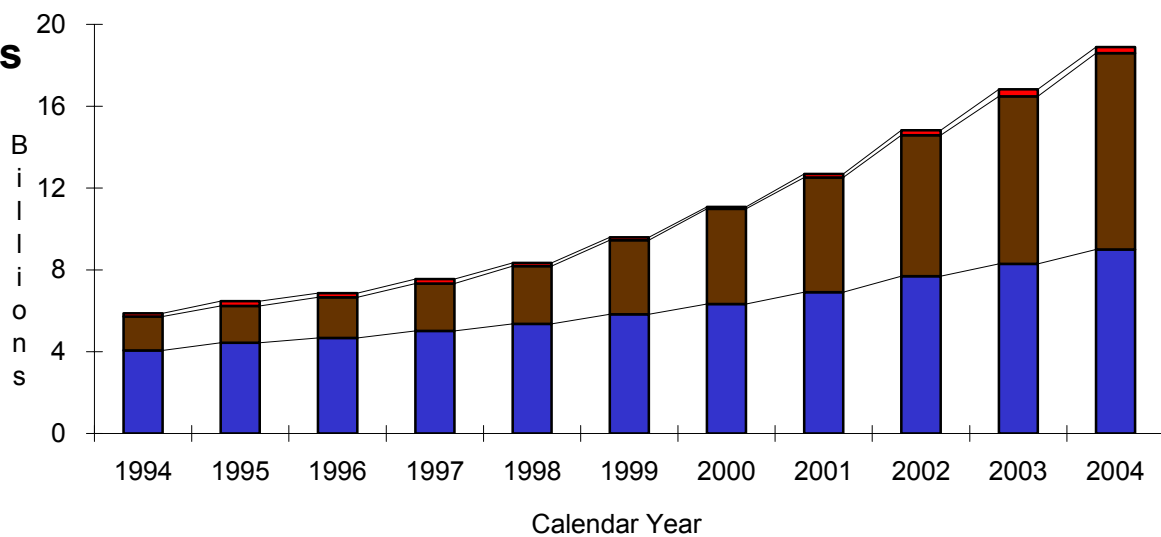


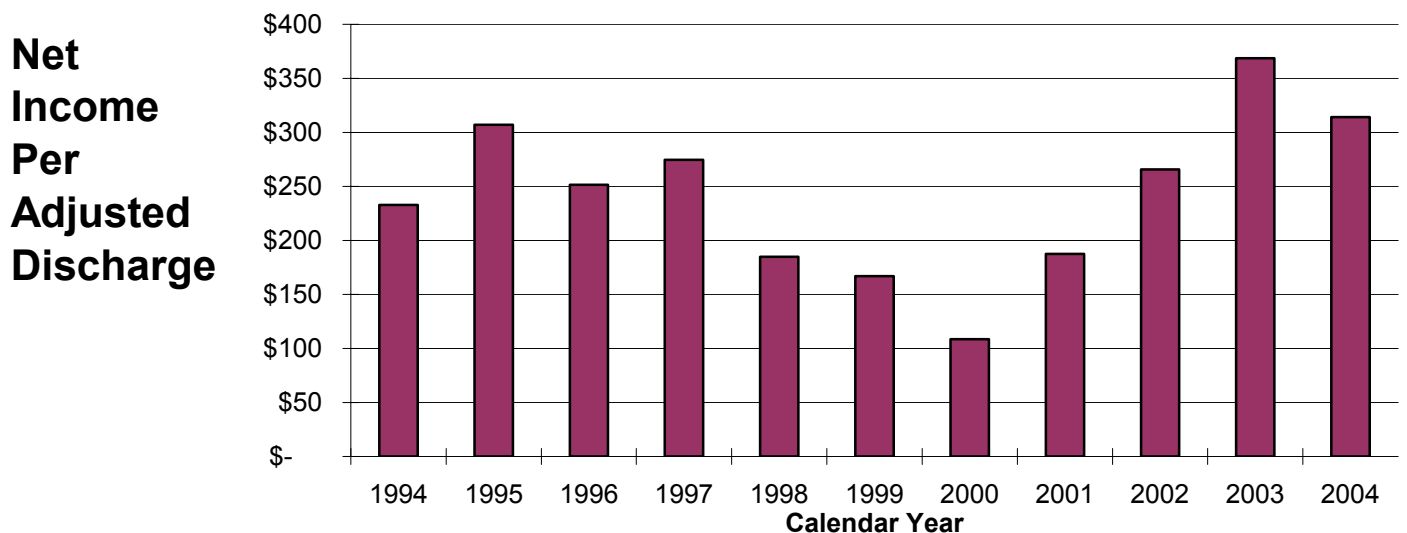
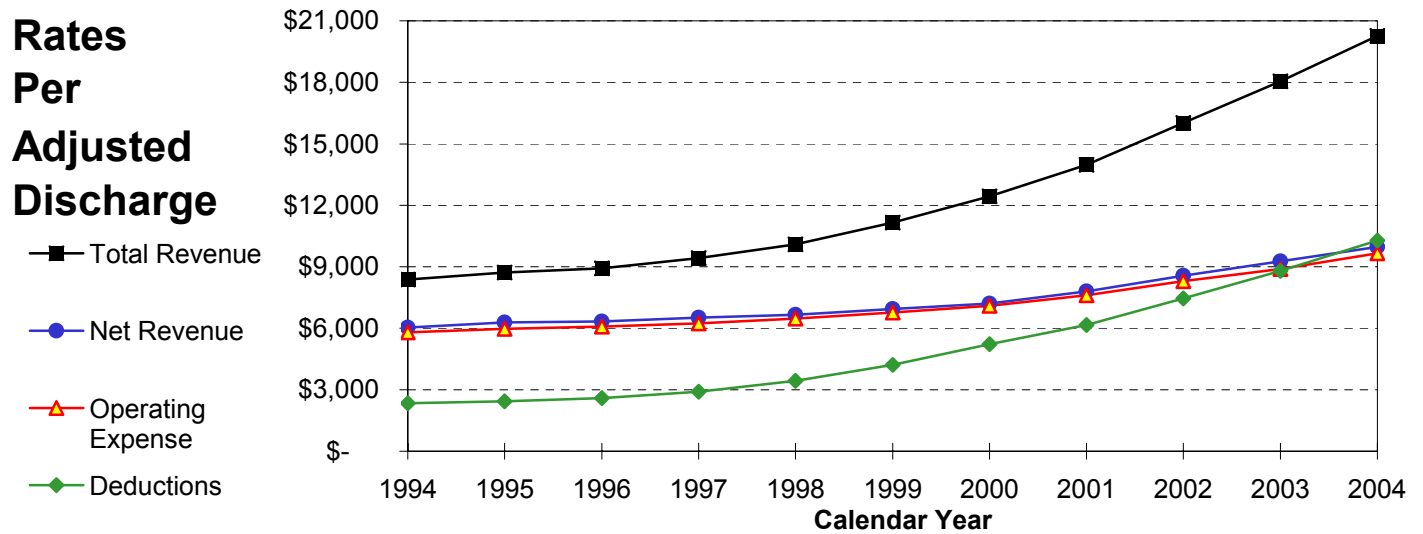
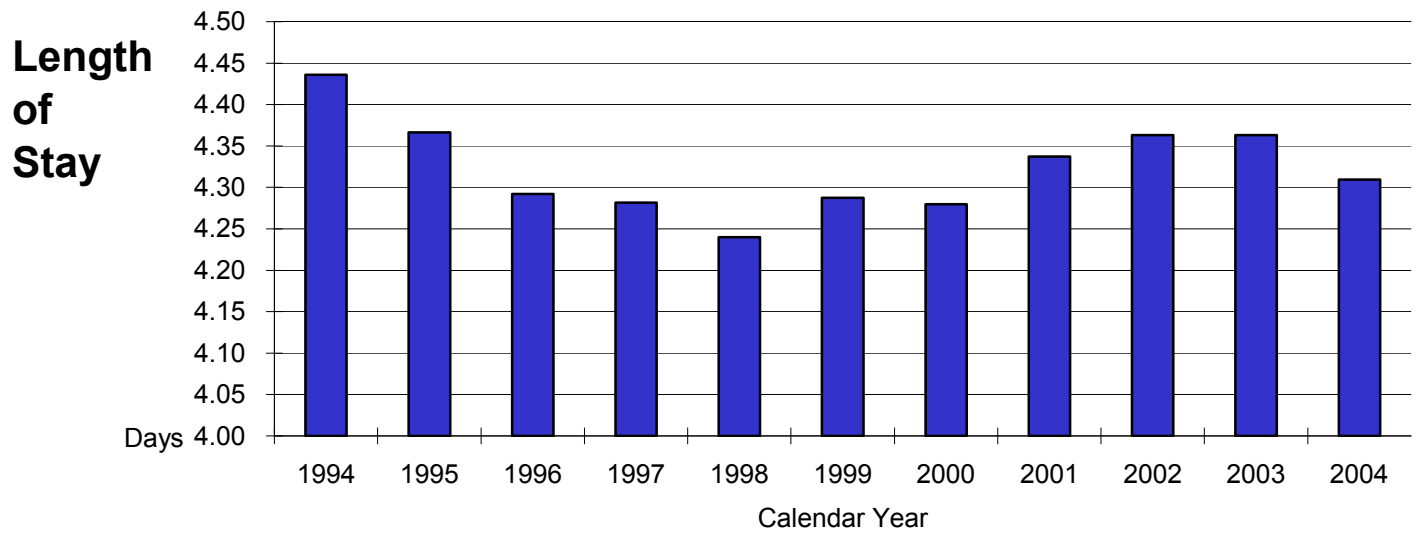
Net Operating Income



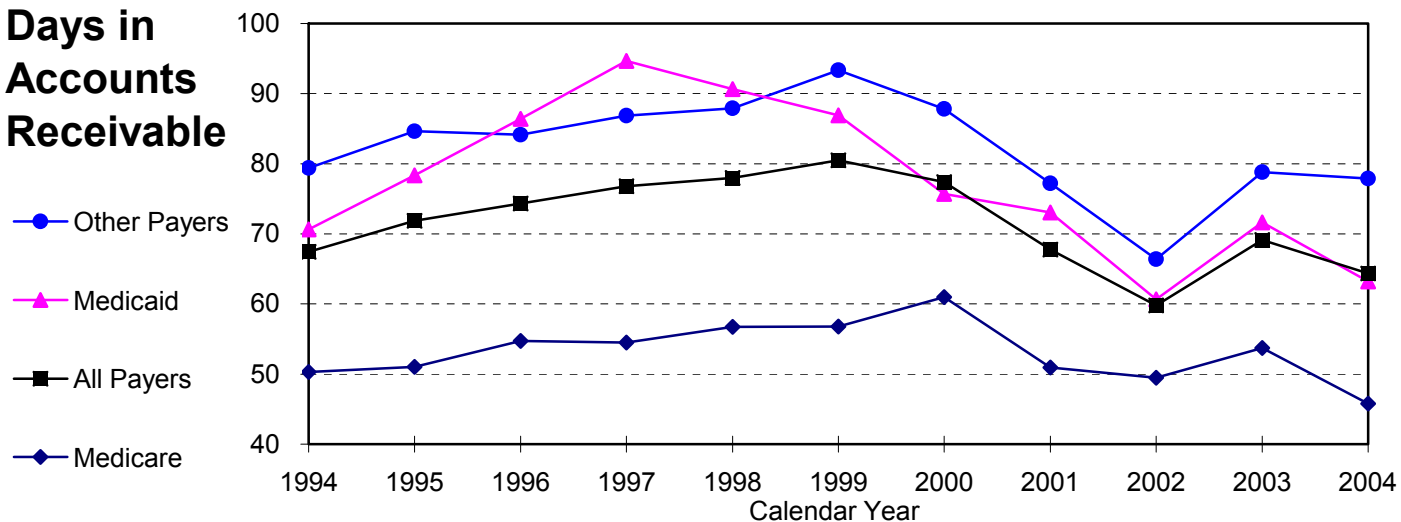
Components of Total Patient Service Revenue

■ Net Operating Income
■ Deductions From Revenue
■ Total Operating Expenses

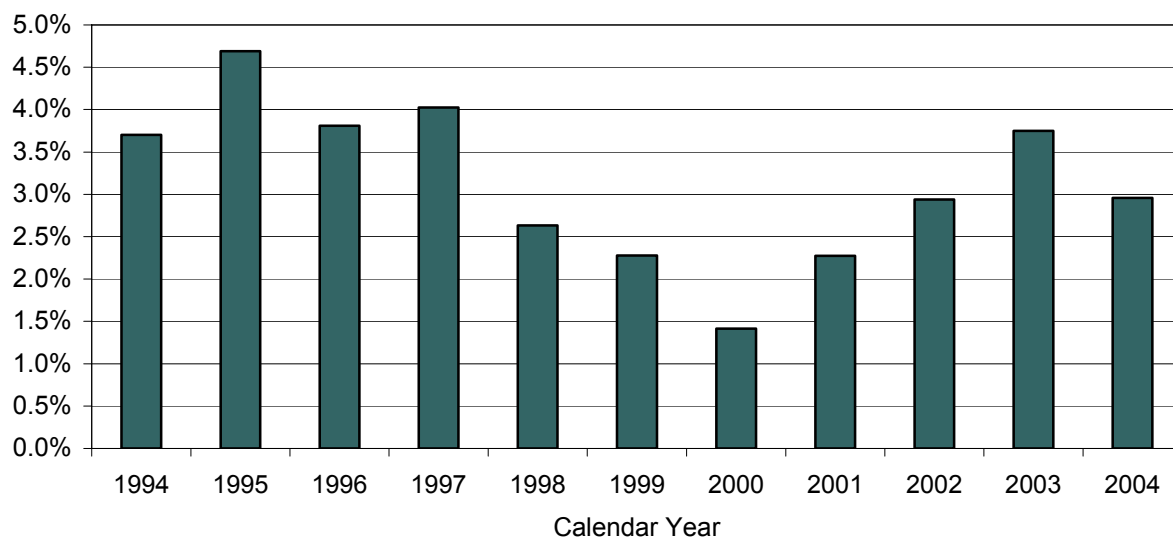




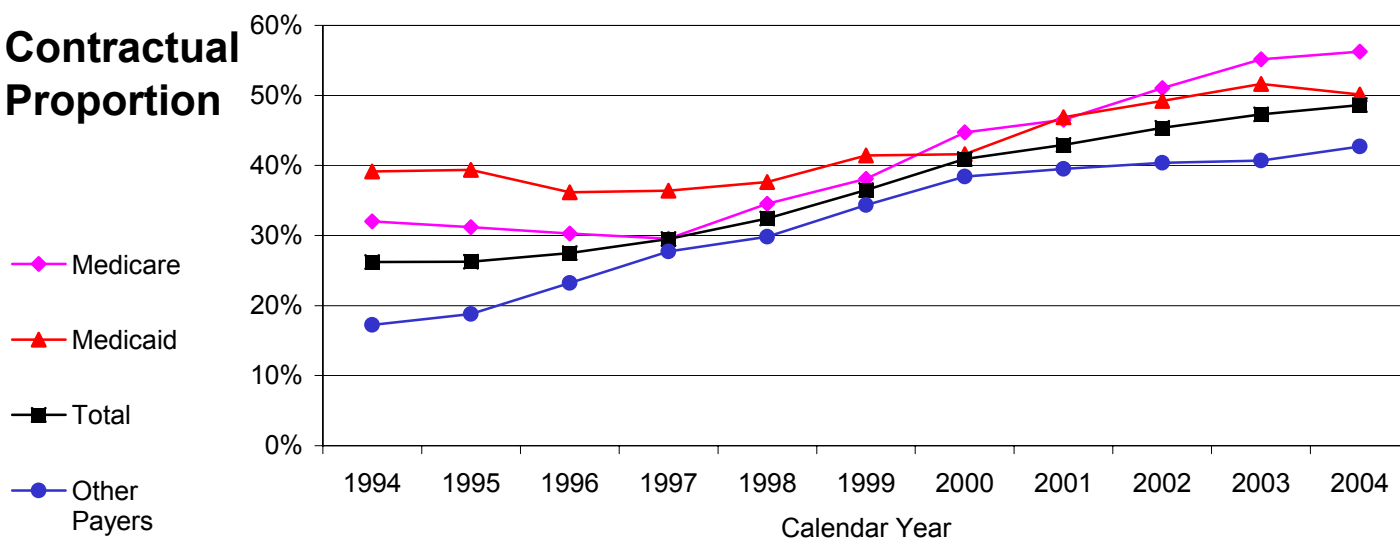
Days in Accounts Receivable



Operating Margin

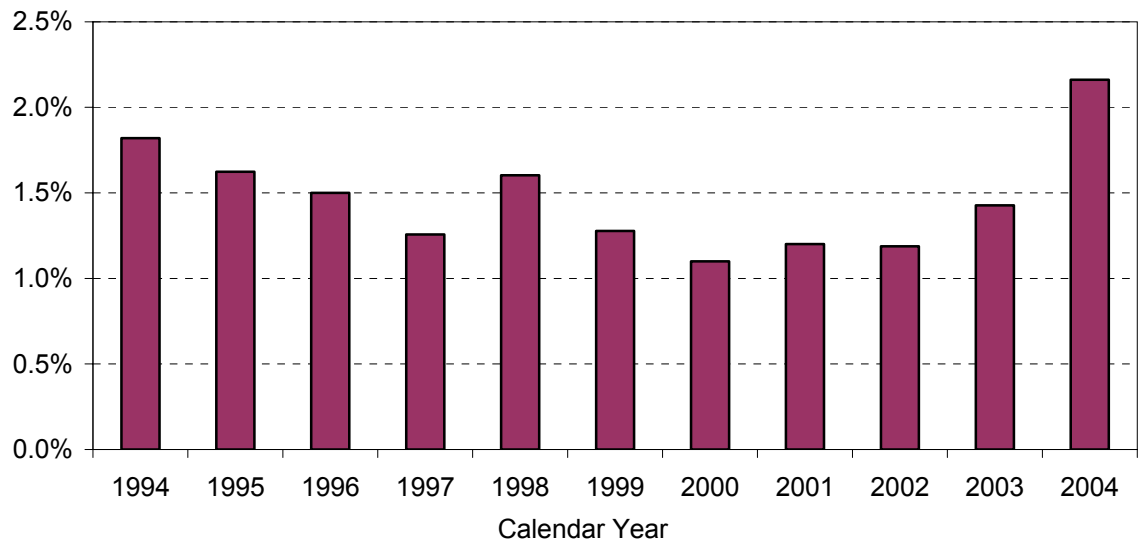


Contractual Proportion

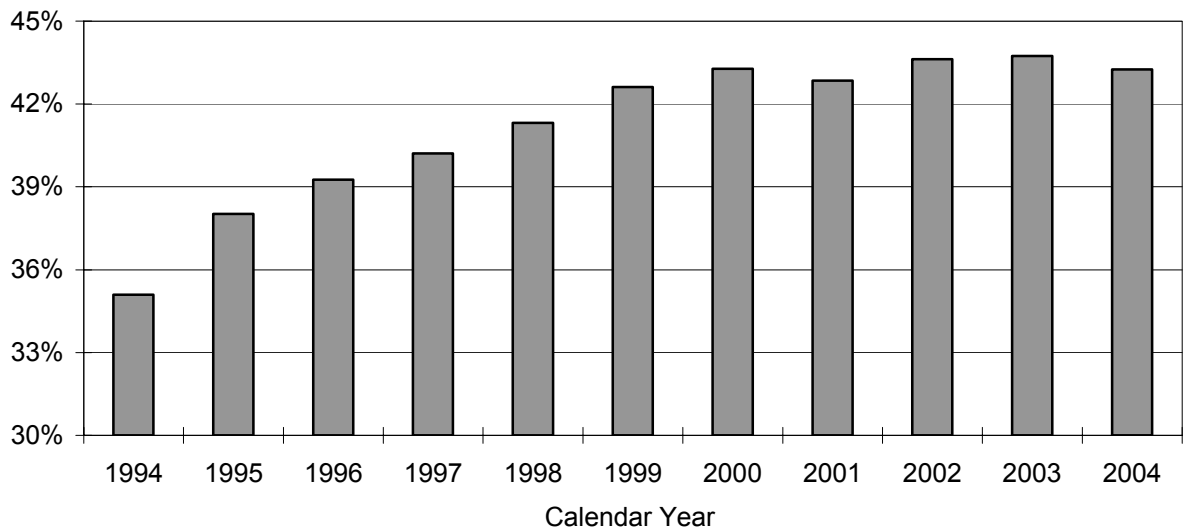


Charity Proportion

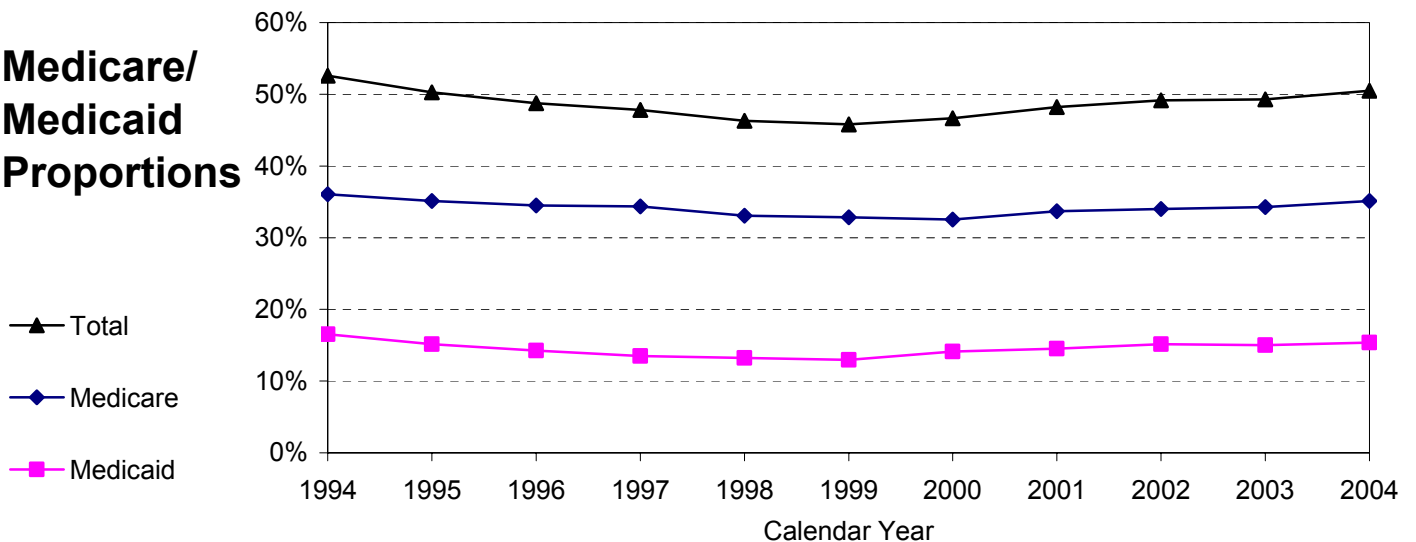
of
Total
Patient
Service
Revenue



Percent Outpatient Revenue



Medicare/Medicaid Proportions



HOSPITAL PERFORMANCE	Calendar Year 2003	Calendar Year 2004	Total Change	Percent Change
Total Patient Revenue				
Inpatient	9,472,153,507	10,720,491,436	1,248,337,929	13.18%
Outpatient	7,362,593,902	8,169,380,057	806,786,155	10.96%
Total	16,834,747,409	18,889,871,493	2,055,124,084	12.21%
Medicare	5,765,516,593	6,632,962,589	867,445,996	15.05%
Medicaid	2,530,332,368	2,902,456,997	372,124,629	14.71%
Other	8,538,898,448	9,354,451,907	815,553,459	9.55%
Deductions From Revenue				
Contractual Adjustments				
Medicare	3,180,064,311	3,732,230,854	552,166,543	17.36%
Medicaid	1,306,116,097	1,454,503,753	148,387,656	11.36%
Other	3,474,572,395	3,995,507,070	520,934,675	14.99%
Total	7,960,752,803	9,182,241,677	1,221,488,874	15.34%
Charity	240,217,799	408,289,201	168,071,402	69.97%
Total	8,200,970,602	9,590,530,878	1,389,560,276	16.94%
Uncompensated Care				
Bad Debt	330,389,632	451,824,846	121,435,214	36.76%
Charity	240,217,799	408,289,201	168,071,402	69.97%
Total	570,607,431	860,114,047	289,506,616	50.74%
Net Patient Revenue				
Medicare	2,585,452,282	2,900,731,735	315,279,453	12.19%
Medicaid	1,224,216,271	1,447,953,244	223,736,973	18.28%
Other	4,824,108,254	4,950,655,636	126,547,382	2.62%
Total	8,633,776,807	9,299,340,615	665,563,808	7.71%
Cost Recoveries	534,813,769	605,549,954	70,736,185	13.23%
Total Operating Revenue	9,168,590,576	9,904,890,569	736,299,993	8.03%
Total Gross Revenue	9,266,191,869	10,040,870,861	774,678,992	8.36%
Total Operating Expenses	8,290,045,993	9,006,423,515	716,377,522	8.64%
Net Operating Income	343,730,814	292,917,100	(50,813,714)	-14.78%
Non-Operating Income	78,441,116	116,073,147	37,632,031	47.97%
Tax Revenue	19,160,177	19,907,145	746,968	3.90%
Net Total Income	441,332,107	428,897,392	(12,434,715)	-2.82%
Gross Accounts Receivable				
Medicare	846,339,082	830,163,064	(16,176,018)	-1.91%
Medicaid	495,379,143	501,260,481	5,881,338	1.19%
Other	1,838,388,300	1,990,386,410	151,998,110	8.27%
Total	3,180,106,525	3,321,809,955	141,703,430	4.46%
Days in Accounts Receivable				
Medicare	53.6	45.7	(7.9)	-14.74%
Medicaid	71.5	63.0	(8.4)	-11.79%
Other Payers	78.6	77.7	(0.9)	-1.17%
Statewide Total	68.9	64.2	(4.8)	-6.91%
Utilization				
Discharges	520,464	525,718	5,254	1.01%
Patient Days	2,270,826	2,265,487	(5,339)	-0.24%
Length of Stay	4.36	4.31	(0.05)	-1.23%
Adjusted Discharges	932,271	932,233	(38)	0.00%
Rates				
Tot Rev Per Adj Disch	18,057.78	20,263.04	2,205.25	12.21%
Deductions Per Adj Disch	8,796.77	10,287.70	1,490.93	16.95%
Net Revenue Per Adj Disch	9,261.02	9,975.34	714.32	7.71%
Oper Expense Per Adj Disch	8,892.31	9,661.13	768.82	8.65%
Net Income Per Adj Disch	368.70	314.21	(54.49)	-14.78%
Financial Ratios				
Operating Margin	3.75%	2.96%	-0.79%	-21.12%
Total Margin	4.76%	4.27%	-0.49%	-10.32%
Deductible Proportion	48.71%	50.77%	2.06%	4.22%
Contractual Proportion - Total	47.29%	48.61%	1.32%	2.80%
Contractual Proportion - Medicare	55.16%	56.27%	1.11%	2.01%
Contractual Proportion - Medicaid	51.62%	50.11%	-1.51%	-2.92%
Contractual Proportion - Other	40.69%	42.71%	2.02%	4.97%
Bad Debt Proportion	1.96%	2.39%	0.43%	21.88%
Charity Proportion	1.43%	2.16%	0.73%	51.47%
Uncompensated Care Proportion	3.39%	4.55%	1.16%	34.34%
Total Rev/Input Rev	1.78	1.76	-0.02	-0.86%
Outpat Rev Percent	43.73%	43.25%	-0.49%	-1.11%
Medicare Rev Percent	34.25%	35.11%	0.87%	2.53%
Medicaid Rev Percent	15.03%	15.37%	0.33%	2.23%

HOSPITAL PERFORMANCE	Calendar Year 1994	Calendar Year 2004	Ten Year Change Total	Ten Year Percent Change Total	Annualized
Total Patient Revenue					
Inpatient	3,816,190,902	10,720,491,436	6,904,300,534	180.92%	10.88%
Outpatient	2,063,148,788	8,169,380,057	6,106,231,269	295.97%	14.75%
Total	5,879,339,690	18,889,871,493	13,010,531,803	221.29%	12.38%
Medicare	2,119,073,071	6,632,962,589	4,513,889,518	213.01%	12.09%
Medicaid	971,833,662	2,902,456,997	1,930,623,335	198.66%	11.56%
Other	2,788,432,957	9,354,451,907	6,566,018,950	235.47%	12.87%
Deductions From Revenue					
Contractual Adjustments					
Medicare	678,369,612	3,732,230,854	3,053,861,242	450.18%	18.59%
Medicaid	380,574,816	1,454,503,753	1,073,928,937	282.19%	14.35%
Other	480,451,893	3,995,507,070	3,515,055,177	731.61%	23.59%
Total	1,539,396,321	9,182,241,677	7,642,845,356	496.48%	19.55%
Charity	107,062,314	408,289,201	301,226,887	281.36%	14.32%
Total	1,646,458,635	9,590,530,878	7,944,072,243	482.49%	19.27%
Uncompensated Care					
Bad Debt	97,921,721	451,824,846	353,903,125	361.41%	16.52%
Charity	107,062,314	408,289,201	301,226,887	281.36%	14.32%
Total	204,984,035	860,114,047	655,130,012	319.60%	15.42%
Net Patient Revenue					
Medicare	1,440,703,459	2,900,731,735	1,460,028,276	101.34%	7.25%
Medicaid	591,258,846	1,447,953,244	856,694,398	144.89%	9.37%
Other	2,200,918,750	4,950,655,636	2,749,736,886	124.94%	8.44%
Total	4,232,881,055	9,299,340,615	5,066,459,560	119.69%	8.19%
Cost Recoveries	176,354,551	605,549,954	429,195,403	243.37%	13.13%
Total Operating Revenue	4,409,235,606	9,904,890,569	5,495,654,963	124.64%	8.43%
Total Gross Revenue	4,409,235,606	10,040,870,861	5,631,635,255	127.72%	8.58%
Total Operating Expenses	4,069,549,966	9,006,423,515	4,936,873,549	121.31%	8.27%
Net Operating Income	163,331,089	292,917,100	129,586,011	79.34%	6.02%
Non-Operating Income	N/A	116,073,147	N/A	N/A	N/A
Tax Revenue	N/A	19,907,145	N/A	N/A	N/A
Net Total Income	N/A	428,897,392	N/A	N/A	N/A
Gross Accounts Receivable					
Medicare	291,987,590	830,163,064	538,175,474	184.31%	11.01%
Medicaid	188,032,440	501,260,481	313,228,041	166.58%	10.30%
Other	606,691,932	1,990,386,410	1,383,694,478	228.07%	12.62%
Total	1,086,711,962	3,321,809,955	2,235,097,993	205.68%	11.82%
Days in Accounts Receivable					
Medicare	50.3	45.7	(4.6)	-9.17%	-0.96%
Medicaid	70.6	63.0	(7.6)	-10.74%	-1.13%
Other Payers	79.4	77.7	(1.8)	-2.21%	-0.22%
Statewide Total	67.5	64.2	(3.3)	-4.86%	-0.50%
Utilization					
Discharges	448,439	525,718	77,279	17.23%	1.60%
Patient Days	1,989,293	2,265,487	276,194	13.88%	1.31%
Length of Stay	4.44	4.31	(0.13)	-2.86%	-0.29%
Adjusted Discharges	701,538	932,233	230,695	32.88%	2.88%
Rates					
Tot Rev Per Adj Disch	8,380.64	20,263.04	11,882.39	141.78%	9.23%
Deductions Per Adj Disch	2,346.93	10,287.70	7,940.77	338.35%	15.93%
Net Revenue Per Adj Disch	6,033.72	9,975.34	3,941.62	65.33%	5.16%
Oper Expense Per Adj Disch	5,800.90	9,661.13	3,860.23	66.55%	5.23%
Net Income Per Adj Disch	232.82	314.21	81.39	34.96%	3.04%
Financial Ratios					
Operating Margin	3.70%	2.96%	-0.75%	-20.17%	-2.23%
Total Margin	N/A	4.27%	4.27%	N/A	N/A
Deductible Proportion	28.00%	50.77%	22.77%	81.30%	6.13%
Contractual Proportion - Total	26.18%	48.61%	22.43%	85.65%	6.38%
Contractual Proportion - Medicare	32.01%	56.27%	24.26%	75.77%	5.80%
Contractual Proportion - Medicaid	39.16%	50.11%	10.95%	27.97%	2.50%
Contractual Proportion - Other	17.23%	42.71%	25.48%	147.89%	9.50%
Bad Debt Proportion	1.67%	2.39%	0.73%	43.61%	3.69%
Charity Proportion	1.82%	2.16%	0.34%	18.69%	1.73%
Uncompensated Care Proportion	3.49%	4.55%	1.07%	30.60%	2.71%
Total Rev/Inpat Rev	1.54	1.76	0.22	14.37%	1.35%
Outpat Rev Percent	35.09%	43.25%	8.16%	23.24%	2.11%
Medicare Rev Percent	36.04%	35.11%	-0.93%	-2.58%	-0.26%
Medicaid Rev Percent	16.53%	15.37%	-1.16%	-7.04%	-0.73%